

Entered - 04/26/00 - sb
CL 00L0245 - GWENDOLYN BURNS

01- R-1066

CLAIM OF: NICK CARPENTIERI
870 Greenwood Avenue
Atlanta, Georgia 30306

For damages alleged to have been sustained as a result of a vehicular
accident on March 27, 2000 at 870 Greenwood Ave.

THIS ADVERSED REPORT IS
APPROVED

BY:


ROSALIND RUBENS NEWELL
DEPUTY CITY ATTORNEY



DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 00L0245

Date: June 27, 2001

Claimant /Victim NICK CARPENTIERI

BY: (Atty) (Ins. Co.) _____

Address: 870 Greenwood Avenue, Atlanta, Georgia 30306

Subrogation: _____ Claim for Property damage \$ 2,576.35 Bodily Injury \$ _____

Date of Notice: 4/14/00 Method: Written, Proper X Improper _____

Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X

Date of Occurrence 3/27/00 Place: 870 Greenwood Avenue

Department PUBLIC WORKS Division Solid Waste Services

Employee involved Joe Evans Disciplinary Action: _____

NATURE OF CLAIM: Claimant alleges that his parked vehicle was struck by a city sanitation vehicle. However, the claimant has refused to accept the City's maximum dollar amount of settlement and has failed to pursue his claim.

INVESTIGATION:

Statements: City employee _____ Claimant _____ Others _____ Written _____ Oral _____

Pictures _____ Diagrams _____ Reports: Police X Dept Report _____ Other X

Traffic citations issued: City Driver _____ Claimant Driver _____

Citation disposition: City Driver _____ Claimant Driver _____

BASIS OF RECOMMENDATION:

Function: Governmental X Ministerial _____

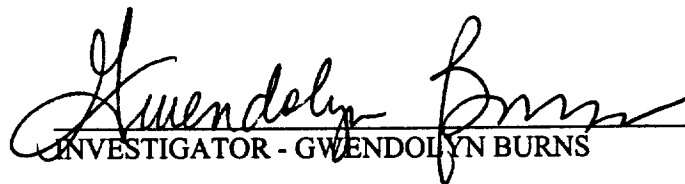
Improper Notice _____ More than Six Months _____ Other X Damages reasonable _____

City not involved _____ Offer rejected _____ Compromise settlement _____

Repair/replacement by Ins. Co. _____ Repair/replacement by City Forces _____

Claimant Negligent _____ City Negligent X Joint _____ Claim Abandoned X

Respectfully submitted,


INVESTIGATOR - GWENDOLYN BURNS

RECOMMENDATION:

Pay \$ _____ Adverse _____ Account charged: 1A01 _____ 2J01 _____ 2H01 _____

Claims Manager:  Concur/date 04-28-01

Committee Action: _____ Council Action _____

APR 14

COUNCIL OF THE CITY OF ATLANTA
MUNICIPAL CLERK
City Hall
55 Trinity Avenue, S.W.
Atlanta, Georgia 30335

RE: CLAIM FOR DAMAGES

Today's Date: 4-11-00

ENTERED - 04/26/00 - tew
00L0245 - GWEN BURNS

BURNS
04/21/00
DR

Dear Municipal Clerk:

This is to notify the City of Atlanta that I have suffered damages in the amount sum of \$ 2576.35 property and/or \$ 0 bodily injury for which I contend the City is liable.

1. Date of incident: 3/27/00 2. Time of Incident: 8:00 AM 3. Police called: X
(month/day/year) Yes No

4. Location of incident (including street address): 870 Greenwood Ave

5. Name of your insurance company: Travellers Policy No. 000874463100

6. State what and how incident occurred: Garbage Truck #21503, driven by Joe EUGAS hit my parked car

7. ALL ESTIMATES AND DAMAGES ARE SUBJECT TO INSPECTION. THE MAKING OF FALSE CLAIMS WILL RESULT IN YOUR CLAIM BEING DENIED AND MAY RESULT IN CRIMINAL PROSECUTION!

8. The registered owner must make the claim for vehicle damages, complete the following and attach two (2) estimates of repair and proof of ownership of your vehicle (copy of the current tag receipt or title).

Your vehicle: Volkswagen 1994 910TGN Nick Carpentieri
(Make) (Year) (Tag Number) (Driver's Name)

City vehicle: CCC Trash Truck Joseph Eugas
(Make) (City Driver's Name) (Department/Bureau)

9. Witness: _____
(Name) (Address) (Telephone Number)

10. The acknowledgement of this claim in no way waives the Sovereign immunity of the City of Atlanta, as granted by State law, nor is it an admission of liability on behalf of the City of Atlanta and/or its employee(s).

11. This claim should be mailed immediately to the address shown above.

I HEREBY SWEAR OR AFFIRM THAT THE ABOVE INFORMATION IS TRUE AND CORRECT.

Nick Carpentieri
Signature of Claimant

Nick Carpentieri
(Print Claimant's Name)

870 Greenwood Ave
(Address)

Atlanta, GA 30306
(City, State and Zip Code)

404-515-0770 x22531 404-678-978
(Work Number) (Home Number)

01- R-1066

Call - (678) 592-6848